

UNITED STATES DISTRICT COURT
FOR THE
EASTERN DISTRICT OF PENNSYLVANIA

**ATTORNEY
COPY**

UNITED STATES OF AMERICA

Plaintiff

CIVIL NO. 02-CV-4866

vs.

LESLIE J. MOYER

Defendant

FILED FEB 20 2003

CERTIFICATE OF SERVICE
PURSUANT TO Pa.R.C.P. 3129.2 (c) (2)

Joseph A. Goldbeck, Jr., Esquire, Attorney for Plaintiff, hereby certifies that service on the Defendants of the Notice of Sheriff Sale was made by:

- () Personal Service by the Sheriff's Office/competent adult (copy of return attached).
() Certified mail by Joseph A. Goldbeck, Jr. (original green Postal return receipt attached).
() Certified mail by Sheriff's Office.
() Ordinary mail by Joseph A. Goldbeck, Jr., Esquire to Attorney for Defendant(s) of record (proof of mailing attached).
() Acknowledgment of Sheriff's Sale by Attorney for Defendant(s) (proof of acknowledgment attached).
() Ordinary mail by Sheriff's Office to Attorney for Defendant(s) of record.

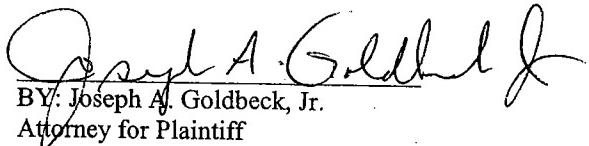
IF SERVICE WAS ACCOMPLISHED BY COURT ORDER.

- () Premises was posted by Sheriff's Office/competent adult (copy of return attached).
() Certified Mail & ordinary mail by Sheriff's Office (copy of return attached).
() Certified Mail & ordinary mail by Joseph A. Goldbeck, Jr. (original receipt(s) for Certified Mail attached).

Pursuant to the Affidavit under Rule 3129 (copy attached), service on all lienholders (if any) has been made by ordinary mail by Joseph A. Goldbeck, Jr., Esquire (copies of proofs of mailing attached).

The undersigned understands that the statements herein are subject to the penalties provided by 18 P.S. Section 4904.

Respectfully submitted,


BY: Joseph A. Goldbeck, Jr.
Attorney for Plaintiff

7160 3901 9844 1076 4350

Case 2:02-cv-04866-WY

Document 3801 9844 filed 03/28/2003 Page 2 of 7

O: MOYER, LESLIE J.
LESLIE J. MOYER
 2183 MAIN STREET #2
 NORTHAMPTON, PA 18067

ENDER: GOLDBECK MCCAFFERTY & MCKEEVER
 December 11, 2002

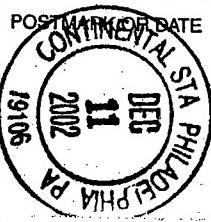
Eference: MOYER, LESLIE J. / USA-0184
 - Northampton

PS Form 3800, June 2000

RETURN RECEIPT SERVICE	Postage	
	Certified Fee	
	Return Receipt Fee	
	Restricted Delivery	
	Total Postage & Fees	

US Postal Service
Receipt for
Certified Mail

No Insurance Coverage Provided
 Do Not Use for International Mail

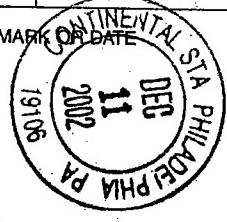


PS Form 3800, June 2000

RETURN RECEIPT SERVICE	Postage	
	Certified Fee	
	Return Receipt Fee	
	Restricted Delivery	
	Total Postage & Fees	

US Postal Service
Receipt for
Certified Mail

No Insurance Coverage Provided
 Do Not Use for International Mail



7160 3901 9844 1076 4350

TO: MOYER, LESLIE J.
LESLIE J. MOYER
 4180 Lehigh Drive
 NORTHAMPTON, PA 18035

ENDER: GOLDBECK MCCAFFERTY & MCKEEVER
 December 11, 2002

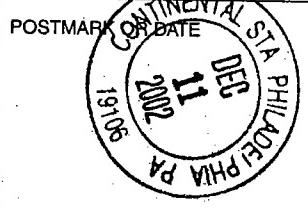
Eference: MOYER, LESLIE J. / USA-0184
 - Northampton

PS Form 3800, June 2000

RETURN RECEIPT SERVICE	Postage	
	Certified Fee	
	Return Receipt Fee	
	Restricted Delivery	
	Total Postage & Fees	

US Postal Service
Receipt for
Certified Mail

No Insurance Coverage Provided
 Do Not Use for International Mail



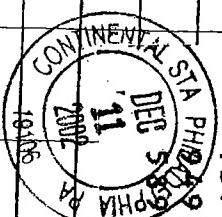
GOLDBECK McCAFFERTY & MCKEEVER

Suite 500 The Bourse Building

Name and Address
of SenderIII S. Independence Mall East
Philadelphia, Pennsylvania 19106

		Check type of mail:			
		<input type="checkbox"/> Express	<input type="checkbox"/> Return Receipt (RR) for Merchandise		
		<input type="checkbox"/> Registered	<input type="checkbox"/> Certified		
		<input type="checkbox"/> Insured	<input type="checkbox"/> Int'l Rec. Del.		
		<input type="checkbox"/> COD	<input type="checkbox"/> Del. Confirmation (DC)		
Line	Article Number	Addressee Name, Street, and PO Address	Postage	Fees	Handling Charge
1		DOMESTIC RELATIONS OF NORTHAMPTON COUNTY 669 Washington Street Easton, PA 18042			(If Reg'd.)
2					Actual Value
3					Insured Value
4		GARY METZGAR ETAL 1616 Miniman Road Eaton, PA 18040			Due Sender If COD
5		PA DEPARTMENT OF PUBLIC WELFARE Bureau of Child Support Enforcement Health and Welfare Bldg - Room 432 P.O. Box 2675 Harrisburg, PA 17105-2675			RR Fee
6		OCCUPANTS/TENANTS 4180 Lehigh Drive Cherryville, PA 18035			DC Fee
7					SC Fee
8					SH Fee
9					SD Fee
10					RD Fee
11					
12					
13					
14					
15					

Total Number of Pieces	Received at Post Office	Postmaster, Per (Name of receiving employee)
<p>Listed by Sender</p> <p>The full declaration of value is required on all domestic and international registered mail. The maximum indemnity payable for the reconstruction of nonnegotiable documents under Express Mail document reconstruction insurance is \$50,000 per piece subject to a limit of \$200,000 per occurrence. The maximum indemnity payable on Express Mail merchandise insurance is \$500. The maximum indemnity payable is \$25,000 for registered mail, sent with optional postal insurance. See Domestic Mail Manual 8900, §813, and 8221 for limitations of coverage on insured and COD mail. See International Mail Manual for limitations of coverage on international mail. Special handling charges apply only to Standard Mail (A) and Standard Mail (B) parcels.</p>		



* 1372 U.S. POSTAGE P 82211913
PA PHILA 498 \$03.600 DEC 11 02
MAILED FROM ZIP CODE 19106

Mayer

USA

UNITED STATES DISTRICT COURT
FOR THE
EASTERN DISTRICT OF PENNSYLVANIA

UNITED STATES OF AMERICA

Plaintiff

CIVIL NO. 02-CV-4866

vs.

LESLIE J. MOYER

Defendant

AFFIDAVIT PURSUANT TO RULE 3129

THE UNITED STATES OF AMERICA, Plaintiff in the above action, by its attorney, Joseph A. Goldbeck, Jr., Esquire, sets forth as of the date the praecipe for the writ of execution was filed the following information concerning the real property located at:

4180 Lehigh Drive
Cherryville, PA 18035

1. Name and address of Owner or Reputed Owner:

LESLIE J. MOYER
4180 Lehigh Drive
Cherryville, PA 18035

2. Name and address of Defendant in the judgment:

LESLIE J. MOYER
4180 Lehigh Drive
Cherryville, PA 18035

3. Name and last known address of every judgment creditor whose judgment is a record lien on the property to be sold:

DOMESTIC RELATIONS OF NORTHAMPTON COUNTY
669 Washington Street
Easton, PA 18042

GARY METZGAR ETAL
1616 Mitman Road
Eaton, PA 18040

PA DEPARTMENT OF PUBLIC WELFARE
Bureau of Child Support Enforcement
Health and Welfare Bldg. - Room 432
P.O. Box 2675
Harrisburg, PA 17105-267

4. Name and address of the last recorded holder of every mortgage of record:

5. Name and address of every other person who has any record interest in or record lien on the property and whose interest may be affected by the sale:

6. Name and address of every other person of whom the plaintiff has knowledge who has any record interest in the property which may be affected by the sale.

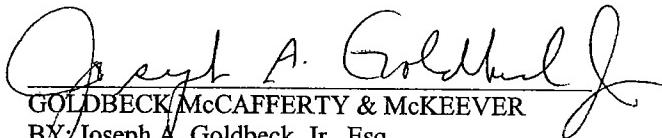
7. Name and address of every other person of whom the plaintiff has knowledge who has any interest in the property which may be affected by the sale.

OCCUPANTS/TENANTS
4180 Lehigh Drive
Cherryville, PA 18035

(attach separate sheet if more space is needed)

I verify that the statements made in this affidavit are true and correct to the best of my personal knowledge or information and belief. I understand that false statements herein are made subject to the penalties of 18 Pa. C.S. Section 4904 relating to unsworn falsification to authorities.

DATED: January 28, 2003


GOLDBECK/McCAFFERTY & McKEEVER
BY: Joseph A. Goldbeck, Jr., Esq.
Attorney for Plaintiff

U.S. Department of Justice
United States Marshals Service

PROCESS RECEIPT AND RETURN

See Instructions for "Service of Process by the U.S. Marshal"
on the reverse of this form.

PLAINTIFF

THE UNITED STATES OF AMERICA

COURT CASE NUMBER

02-CV-4866

DEFENDANT

LESLIE J. MOYER

TYPE OF PROCESS NOTICE OF
US MARSHAL SALE

SERVE

NAME OF INDIVIDUAL, COMPANY, CORPORATION, ETC., TO SERVE OR DESCRIPTION OF PROPERTY TO SEIZE OR CONDEMN



LESLIE J. MOYER

ADDRESS (Street or RFD, Apartment No., City, State and ZIP Code)

AT

4180 LEHIGH DRIVE, HARRINGTON PARK, PA 18035

SEND NOTICE OF SERVICE COPY TO REQUESTER AT NAME AND ADDRESS BELOW:



GOLDBECK McCAFFERTY & McKEEVER

Suite 500 The Bourse Building
111 S. Independence Mall East
Philadelphia, Pennsylvania 19106



Number of process to be served with this Form - 285

Number of parties to be served in this case

Check for service on U.S.A.

SPECIAL INSTRUCTIONS OR OTHER INFORMATION THAT WILL ASSIST IN EXPEDITING SERVICE (Include Business and Alternate Addresses, All Telephone Numbers, and Estimated Times Available For Service):

Fold

Fold

PLEASE POST HANDBILL

Signature of Attorney or other Originator requesting service on behalf of:

Joseph A. Grubbs

 PLAINTIFF
 DEFENDANT

TELEPHONE NUMBER

215-627-1324

DATE

12-11-02

SPACE BELOW FOR USE OF U.S. MARSHAL ONLY — DO NOT WRITE BELOW THIS LINE

I acknowledge receipt for the total number of process indicated.

(Sign only first USM 285 if more than one USM 285 is submitted)

Total Process

District of Origin

District to Serve

No. 66

No. 66

Signature of Authorized USMS Deputy or Clerk

George Lee

Date

12-16-02

I hereby certify and return that I have personally served, have legal evidence of service, have executed as shown in "Remarks", the process described on the individual, company, corporation, etc., at the address shown above or on the individual, company, corporation, etc., shown at the address inserted below.

I hereby certify and return that I am unable to locate the individual, company, corporation, etc., named above (See remarks below)

Name and title of individual served (if not shown above)

 A person of suitable age and discretion then residing in the defendant's usual place of abode.

Address (complete only if different than shown above)

Date of Service

Time

am

12/11/02

pm

Signature of U.S. Marshal or Deputy

M.L.

Service Fee	Total Mileage Charges (including endeavors)	Forwarding Fee	Total Charges	Advance Deposits	Amount owed to U.S. Marshal or	Amount of Refund
	12 miles RT				15.12	

REMARKS: Plaintiff was unavailable and unable to be served.



NOTE